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(Depositor's name) (Signature) (Date) APPLICATION NO FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO CONFIRMATION NO. 06/21/2006 10/583,859 Shuzo Fujiwara SANK.0009 8591 TITLE OF INVENTION: BLASTING METHOD BY CONTROLLING OXYGEN SUPPLY SMALL ENTITY APPLN. TYPE ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE NO \$1,510 \$300 nonprovisional \$1,810 03/05/2009 **EXAMINER** ART UNIT CLASS - SUBCLASS DAVID, MICHAEL D. 3641 102-301000 Change of correspondence address or indication of DFee Address* (37 CFR §1.363). Use of PTO form(s) and Customer Number are recommended, but not required. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1. Reed Smith LLP or agents OR, alternatively, (2) the name of a single firm (have as a member a registered ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attorney or agent) and the names of up to 2 2. Juan Carlos A. Marquez, Esq. registered patent attorneys or agents. If no name is listed, no name will be printed **Fee Address* indication (or "Fee Address* Indication form PTO/SB/47) attached. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) (1) National Institute of Advanced Industrial Science and Technology

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(Authorized Signature)

(Date) January 21, 2009

Juan C.A. Marquez Reg. No. 34,072

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